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Bib Data Sheet

CONFIRMATION NO. 4728

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|---|---|-------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>09/857,396  | <b>FILING OR 371(c) DATE</b><br>05/31/2001<br><b>RULE</b>   | <b>CLASS</b><br>602           | <b>GROUP ART UNIT</b><br>3764   | <b>ATTORNEY DOCKET NO.</b><br>480032-322                     |
| <b>APPLICANTS</b><br>Joseph M. Iglesias, Agoura, CA;<br>Eric E. Johnson, Carlsbad, CA;<br>Tracy E. Grim, Tulsa, OK;<br>William K. Arnold, Longmeadow, MA;   |   |                               |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US97/15265 08/29/1997 <i>Jim</i><br>which is a CIP of 08/705,218 08/29/1996 ABN <i>Jim</i>  |   |                               |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |  |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>1</i> Allowance<br>Verified and <i>FCM</i><br>Acknowledged <i>FCM</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>10   | <b>TOTAL CLAIMS</b><br>58<br><b>INDEPENDENT CLAIMS</b><br>17 |
| <b>ADDRESS</b><br>Alan C Rose<br>Oppenheimer Wolff & Donnelly<br>233 Wilshire Blvd<br>Suite 700<br>Santa Monica, CA 90401-1207  |   |                               |   |  |
| <b>TITLE</b><br>Comfortable orthopaedic support and the method of making the same   |   |                               |   |  |
| <b>FILING FEE RECEIVED</b><br>1630  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |